



# TRANSMITTAL FORM

to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

6

Application Number

09/531,996

Filing Date

March 20, 2000

First Named Inventor

Miller, Mark J.

Art Unit

2634

Examiner Name

Cutris B. Odom

Attorney Docket Number

017018-001210US

## ENCLOSURES (Check all that apply)

|                                                                           |                                                                                                  |                                                                                         |
|---------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|
| <input type="checkbox"/> Fee Transmittal Form                             | <input type="checkbox"/> Drawing(s)                                                              | <input type="checkbox"/> After Allowance Communication to TC                            |
| <input type="checkbox"/> Fee Attached                                     | <input type="checkbox"/> Licensing-related Papers                                                | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences     |
| <input checked="" type="checkbox"/> Amendment/Reply                       | <input type="checkbox"/> Petition                                                                | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final                                      | <input type="checkbox"/> Petition to Convert to a Provisional Application                        | <input type="checkbox"/> Proprietary Information                                        |
| <input type="checkbox"/> Affidavits/declaration(s)                        | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address          | <input type="checkbox"/> Status Letter                                                  |
| <input type="checkbox"/> Extension of Time Request                        | <input type="checkbox"/> Terminal Disclaimer                                                     | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):         |
| <input type="checkbox"/> Express Abandonment Request                      | <input type="checkbox"/> Request for Refund                                                      | Return Postcard                                                                         |
| <input type="checkbox"/> Information Disclosure Statement                 | <input type="checkbox"/> CD, Number of CD(s) _____                                               |                                                                                         |
|                                                                           | <input type="checkbox"/> Landscape Table on CD                                                   |                                                                                         |
| <input type="checkbox"/> Certified Copy of Priority Document(s)           | Remarks The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430. |                                                                                         |
| <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application   |                                                                                                  |                                                                                         |
| <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 |                                                                                                  |                                                                                         |

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

|              |                                    |          |        |
|--------------|------------------------------------|----------|--------|
| Firm Name    | Townsend and Townsend and Crew LLP |          |        |
| Signature    |                                    |          |        |
| Printed name | George B. F. Yee                   |          |        |
| Date         | March 13, 2006                     | Reg. No. | 37,478 |

## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

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| Signature             |                  |      |                |
| Typed or printed name | Matilde C. Garza | Date | March 13, 2006 |

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On March 13, 2006

TOWNSEND and TOWNSEND and CREW LLP

By: Matilde C. Garza  
Matilde C. Garza



PATENT  
Attorney Docket No.: 017018-001210US  
Client Ref. No.: VS-0012

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of:

MARK J. MILLER et al.

Application No.: 09/531,996

Filed: March 20, 2000

For: METHOD AND APPARATUS FOR  
MULTIPLE ACCESS OVER A  
COMMUNICATION CHANNEL

Customer No.: 20350

Confirmation No. 6353

Examiner: Cutris B. Odom

Technology Center/Art Unit: 2634

AMENDMENT

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed December 13, 2005, please enter the following amendments and remarks:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 5 of this paper.